Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF TENNESSEE	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Y	our full name		
	rite the name that is on our government-issued	DAVID First name	MISTY First name
e)	cture identification (for xample, your driver's	MICHAEL	RENEE
	cense or passport).	Middle name	Middle name
id	ring your picture entification to your eeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	HEITMAN Last name and Suffix (Sr., Jr., II, III)
	Il other names you have sed in the last 8 years		MISTY RENEE CHAPMAN MISTY R. CHAPMAN
	clude your married or aiden names.		MISTY R. HEITMAN
yd ni In Id	nly the last 4 digits of our Social Security umber or federal dividual Taxpayer lentification number TIN)	xxx-xx-7711	xxx-xx-0212

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs				
5. Where you live 356 E BANGHAM RD		If Debtor 2 lives at a different address:				
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code County				
	PUTNAM					
	County					
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)				
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) Business name(s) Business name(s) Business name(s) Business name(s) Business name(s) Business name or EINs. Business name or EINs.				

	otor 1 DAVID MICHAEL otor 2 MISTY RENEE HE				_	Case r	number (if known)	
Par	t 2: Tell the Court About	Your Bankrı	uptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapte	r 7					
		☐ Chapte	r 11					
		☐ Chapte	r 12					
		☐ Chapte	r 13					
8.	How you will pay the fee	about orde a pre	ill pay the entire fee when I file my petition. Please check with the clerk's office in your but how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, er. If your attorney is submitting your payment on your behalf, your attorney may pay with re-printed address. The detail is a pay the fee in installments. If you choose this option, sign and attach the Applica of Filing Fee in Installments (Official Form 103A). The detail is a paying the property of the property of the property of the policy of the property of				a, cashier's check, or money a credit card or check with ation for Individuals to Pay	
		appli	ies to you	ur family size and you are una on to Have the Chapter 7 Filin	ble to pay	the fee in install	ments). If you choose t	this option, you must fill out
9. Have you filed for bankruptcy within the last 8 years?								
			District	MIDDLE DIST OF TN	When	8/15/14	Case number	214-06520 Ch.13
			District		When		Case number	
			District		_ When		Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.						
			Debtor				Relationship to y	ou
			District		When		Case number, if	known
			Debtor				Relationship to y	ou
			District		_ When		Case number, if	known
11.		□ No.	Go to li	ne 12.				
	residence?	Yes.	Has yo	ur landlord obtained an eviction	on judgm	ent against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statement</i> bankruptcy petition.	About ar	Eviction Judgme	ent Against You (Form	101A) and file it with this

	tor 1 DAVID MICHAEL I tor 2 MISTY RENEE HE		N .	Case number (if known)		
Pari	t 3: Report About Any Bu	ısinesses	You Own as a Sole Prop	rietor		
12. Are you a sole proprietor of any full- or part-time business?		■ No.	■ No. Go to Part 4.			
		☐ Yes.	Name and location of l	business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	ny		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, S			
	it to this petition.			box to describe your business:		
			☐ Health Care B	usiness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset R	eal Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (a)	s defined in 11 U.S.C. § 101(53A))		
			☐ Commodity Bro	oker (as defined in 11 U.S.C. § 101(6))		
			☐ None of the ab	ove		
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business If you are filing under Chapter 11, the court must know whether you are a small business of deadlines. If you indicate that you are a small business debtor, you must attach your most operations, cash-flow statement, and federal income tax return or if any of these document in 11 U.S.C. 1116(1)(B).		are a small business debtor, you must attach your most recent balance sheet, statement of				
	debtor? For a definition of small	■ No.	I am not filing under C	hapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chap Code.	ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chap	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	Report if You Own or	Have An	, Hazardous Property or	Any Property That Needs Immediate Attention		
	Do you own or have any	■ No.	, mazaracae i reperty er	, and the point of the control of th		
	property that poses or is					
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	ninent and What is the hazard? fiable hazard to				
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed	?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
	• • • • • • • • • • • • • • • • • • •			Number, Street, City, State & Zip Code		

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 DAVID MICHAEL htor 2 MISTY RENEE HE				Case num	ber (if known)	
Par	t 6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe t	that are not consu	mer debts or busin	ess debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	So to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available			operty is excluded and administrative expenses rs?	
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49		1 ,000-5,000)	1 25,001-50,000	
		□ 50-99		5001-10,000		50,001-100,000	
		☐ 100-19 ☐ 200-99		□ 10,001-25,0	000	☐ More than100,000	
19.	How much do you	\$ 0 - \$5	50.000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,00	1 - \$100,000	\$10,000,00		□ \$1,000,000,001 - \$10 billion	
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
		— \$500,0					
20.	How much do you estimate your liabilities	□ \$0 - \$5	-7	\$1,000,001		□ \$500,000,001 - \$1 billion	
	to be?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
		. ,	001 - \$500,000 101 - \$1 million		01 - \$500 million	☐ More than \$50 billion	
Par	t 7: Sign Below						
For	you	I have exa	amined this petition, and I declare	under penalty of	perjury that the info	ormation provided is true and correct.	
		If I have chosen to file under Chapter 7, I am aware that I United States Code. I understand the relief available under					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 151 and 3571.					
		/s/ DAVI	D MICHAEL HEITMAN		/s/ MISTY REN		
			IICHAEL HEITMAN of Debtor 1		MISTY RENEE Signature of Deb		
		Executed	on August 19, 2019 MM / DD / YYYY			MM / DD / YYYY	

Debtor 1	DAVID MICHAEL HEITMAN
Debtor 2	MISTY RENEE HEITMAN

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Steven L. Lefkovitz	Date	August 19, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Steven L. Lefkovitz 5953		
Printed name		
LEFKOVITZ & LEFKOVITZ		
Firm name		
618 CHURCH ST., #410		
NASHVILLE, TN 37219		
Number, Street, City, State & ZIP Code		
Contact phone 615-256-8300	Email address	slefkovitz@lefkovitz.com
5953 TN		
Bar number & State		

Fill ir	in this information to identify your case:			
Debto				
Dobit	DAVID IIIIOTIALE TETTIIAA	st Name		
Debto				
(Spous	use if, filing) First Name Middle Name Las	st Name		
Unite	ted States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSE	<u> </u>		
Case	se number			
(if knov			☐ CI	heck if this is an
			ar	mended filing
Sun Be as inforn your o	ficial Form 106Sum mmary of Your Assets and Liabilities and Certa s complete and accurate as possible. If two married people are filing to mation. Fill out all of your schedules first; then complete the information original forms, you must fill out a new Summary and check the box at	ogether, both are equally responsible fo ion on this form. If you are filing amende		
Part ²	11: Summarize Your Assets			
				ur assets lue of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		_	00 000 00
	1a. Copy line 55, Total real estate, from Schedule A/B		\$	39,300.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	9,718.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	49,018.00
Part 2	t 2: Summarize Your Liabilities			
				ur liabilities ount you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Fo 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the column A.		\$	32,523.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106B 3a. Copy the total claims from Part 1 (priority unsecured claims) from line	E/F) 6e of Schedule F/F	\$	0.00
			٠.	
;	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from	line 6j of Schedule E/F	\$	54,289.84
		Your total liabilities	\$	86,812.84
Part 3	13: Summarize Your Income and Expenses			
	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	6,682.91
	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	6,687.00
Part 4	4: Answer These Questions for Administrative and Statistical Reco	ords		
6	Are you filing for hankrupton under Chanters 7, 44, or 422		_	
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this bo	ox and submit this form to the court with you	ur othe	r schedules.
	■ Yes			
7.	What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are the household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statisti	ose "incurred by an individual primarily for a cal purposes. 28 U.S.C. § 159.	a perso	onal, family, or

the court with your other schedules. Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,132.86

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Best Case Bankruptcy

Doc 1

Debtor 2	DAVID MICHAEL	HEITMAN		
Debtor 2	First Name	Middle Name Last Name		
Spouse, if filing)	MISTY RENEE HE	EITMAN Middle Name Last Name		
•				
Jilled States Balik	duptcy Court for the.	MIDDLE DISTRICT OF TENNESSEE		
Case number				☐ Check if this is a
				amended filing
)44: a: a l	40CA/D			
Official Form				
schedule	A/B: Prop	erty		12/15
		, Land, or Other Real Estate You Own or Have an Interest In e interest in any residence, building, land, or similar property?	,	
☐ No. Go to Part 2				
Yes. Where is the	he property?			
308 4TH AV BAXTER TN Street address, if a		What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	State	☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property	Current value of the entire property? \$39,300.00	Current value of the portion you own?
City		☐ Timeshare		
City		Other Who has an interest in the property? Check one	- life extens if his evine	your ownership interest nancy by the entireties, o
ŕ		Who has an interest in the property? Check one Debtor 1 only	- life extens if his evine	nancy by the entireties, o
PUTNAM County		Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	à life estate), if known.	nancy by the entireties, o
PUTNAM		Who has an interest in the property? Check one Debtor 1 only	- life extens if his evine	nancy by the entireties, o
PUTNAM		Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	a life estate), if known. Check if this is co (see instructions)	nancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debte		OAVID MICHAEL HEITMA MISTY RENEE HEITMAN		ase number (if known)		
3. Ca	rs, vans,	trucks, tractors, sport utili	ty vehicles, motorcycles	_		
	No					
	Yes					
-	162					
3.1	Make:	TOYOTA	Who has an interest in the property? Check one	Do not deduct secured	claims or exemptions. Put	
5.1	Model:	SIENNA	Debtor 1 only		ured claims on Schedule D: laims Secured by Property.	
	Year:	2006	Debtor 2 only			
	Approxir	nate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
		formation:	☐ At least one of the debtors and another			
			Check if this is community property (see instructions)	\$3,200.00	\$3,200.00	
		DODGE		Do not deduct secured	claims or exemptions. Put	
3.2	Make:	DODGE CARAVAN	Who has an interest in the property? Check one	the amount of any sec	ured claims on <i>Schedule D:</i>	
	Model: Year:	2005	Debtor 1 only	Creditors Who Have C	laims Secured by Property.	
			Debtor 2 only	Current value of the		
	Approximate mileage: Other information:		Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	entire property?	portion you own?	
		iomaton.	At least one of the debtors and another			
			☐ Check if this is community property (see instructions)	\$700.00	\$700.00	
	amples: B		/s and other recreational vehicles, other vehicles, and all watercraft, fishing vessels, snowmobiles, motorcycle			
	Yes					
4.1	Make:		Who has an interest in the property? Check one			
			the amount of		claims or exemptions. Put ured claims on Schedule D:	
	Model:		Debtor 1 only		laims Secured by Property.	
	Year:		Debtor 2 only	Current value of the	Current value of the	
			Debtor 1 and Debtor 2 only	entire property?	portion you own?	
	Other inf	formation:	☐ At least one of the debtors and another	¢450.00	\$150.00	
	4' x 7'	UTILITY TRAILER	☐ Check if this is community property (see instructions)	\$150.00	\$150.00	
			u own for all of your entries from Part 2, including a /rite that number here		\$4,050.00	
.pa	iges you	nave attached for Part 2. W	rrite that number here		+ 1,000.00	
Part 2	Doscri	ho Vour Porconal and Househ	old Itams			
Part 8		be Your Personal and Househor have any legal or equitab	le interest in any of the following items?		Current value of the	
,					portion you own? Do not deduct secured claims or exemptions.	
		goods and furnishings			, , , , ,	
_	<i>(amples:</i> No	Major appliances, furniture, li	nens, cnina, kitchenware			
_		andriha				
	res. De	escribe				

Official Form 106A/B Schedule A/B: Property page 2

Debtor 1

TABLE & CHAIRS-100 REFRIGERATOR-50 FREEZER-50 MICROWAVE-25 HUTCH-75 CHINA-15 MICROWAVE CART-10 SOFA-50 LOVVESEAT-30 CHAIR-40 TABLE-50 LAMP-2 3 TVs-170 DVD PLAYER-10 2 COMPUTERS-150 PRINTER-20 BEDROOM 1-150 BEDROOM 2-100 BEDROOM 3-100 BEDROOM 4-150 LAWN FURNITURE-20 2 PUSH MOWERS-10 (not running) LAWN & GARDEN TOOLS-30 WEEDEATER-5 TOOLS-150

IN STORAGE UNIT: SHELVES-50 CABINET-10 TOOLS-80 TOYS-20 BINS-10 DOLLY-15 BED-100 DRESSER-30

\$1,767.00

7.	 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No ■ Yes. Describe
	5 FITNESS TRACKERS-75 3 KINDLE FIRE TABLETS-45 BATTERY CHARGER-40 \$160.00
8.	Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No □ Yes. Describe
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments □ No ■ Yes. Describe
	SPORTS EQUIPMENT/GEAR-200 CAMPING GEAR-150 SCRAPBOOKING SUPPLIES-120 \$510.00
10	 Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No ■ Yes. Describe
	MUZZLE LOADER \$80.00
11	 Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe
	CLOTHES \$400.00
12	 Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No ■ Yes. Describe

Official Form 106A/B

Schedule A/B: Property

page 3

Best Case Bankruptcy

		RENEE HEITMAN	Case numbe	er (if known)	
		WEDDING RINGS-3 EARRINGS-30 NEO	800 CKLACES-40 RINGS-50		\$420.00
	Non-farm animal Examples: Dogs, □ No ■ Yes. Describe	s cats, birds, horses			
		CAT- PET FISH TANK			\$0.00
	Any other person ☐ No ■ Yes. Give spec	ific information	did not already list, including any health aids you did D PICTURES-120 X-BOX 360 W/7 GAMES-100	not list	
		CDs & DVDs-50	FICTORES-120 A-BOX 300 W// GAMES-100		\$420.00
	for Part 3. Write	that number here	om Part 3, including any entries for pages you have att	tached \$3,75	57.00
	o you own or have	Financial Assets any legal or equitable intere	st in any of the following?	Current value portion you ov Do not deduct s claims or exem	vn? secured
	Cash Examples: Money No Yes		ur home, in a safe deposit box, and on hand when you file	your petition	
		ing, savings, or other financial	accounts; certificates of deposit; shares in credit unions, bounts with the same institution, list each.	brokerage houses, and other sin	ıilar
	■ Yes		Institution name:		
		17.1.	FSNB- CHECKIN		\$386.00
		ands, or publicly traded stocl funds, investment accounts wit	h brokerage firms, money market accounts		
19.			corporated and unincorporated businesses, including	an interest in an LLC, partner	ship, and
		ific information about them Name of entity:		ship:	
	Negotiable instru	corporate bonds and other interests include personal checks	negotiable and non-negotiable instruments , cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them.		
		fic information about them			
Offi	cial Form 106A/B	Issuer name:	Schedule A/B: Property		page 4

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Best Case Bankruptcy

	ebtor 1 ebtor 2	DAVID MICHAEL HEITMAN MISTY RENEE HEITMAN	Case number (if known)	
21		ent or pension accounts les: Interests in IRA, ERISA, Keogh, 40	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
		ist each account separately. Type of account:	Institution name:	
22	Your sh		nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications companies, or other	ners
	_		Institution name or individual:	
			PUTNAM PROPERTIES	\$1,155.00
23		es (A contract for a periodic payment of	of money to you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and descrip	otion.	
24	26 U.S.C	s in an education IRA, in an account c. §§ 530(b)(1), 529A(b), and 529(b)(1)	t in a qualified ABLE program, or under a qualified state tuition program.	
	■ No □ Yes	Institution name and des	scription. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	■ No		perty (other than anything listed in line 1), and rights or powers exercisable t	for your benefit
		Give specific information about them		
26		, copyrights, trademarks, trade secres: Internet domain names, websites,	rets, and other intellectual property proceeds from royalties and licensing agreements	
	☐ Yes.	Give specific information about them		
27		es, franchises, and other general into les: Building permits, exclusive license	angibles es, cooperative association holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific information about them	•	
M	oney or p	roperty owed to you?	port Do r	rent value of the ion you own? not deduct secured as or exemptions.
28	_	unds owed to you		
	■ No □ Yes. 0	Give specific information about them, in	ncluding whether you already filed the returns and the tax years	
29	. Family Examp ■ No		ousal support, child support, maintenance, divorce settlement, property settlemer	nt
		Give specific information		
30		mounts someone owes you les: Unpaid wages, disability insurance benefits; unpaid loans you made to	e payments, disability benefits, sick pay, vacation pay, workers' compensation, So to someone else	ocial Security
	_	Give specific information		
31	. Interest Examp ☐ No	s in insurance policies les: Health, disability, or life insurance;	; health savings account (HSA); credit, homeowner's, or renter's insurance	
Off	ficial Form	106A/B	Schedule A/B: Property	page 5

Best Case Bankruptcy

Debtor 1 Debtor 2	DAVID MICHAEL HEITMAN MISTY RENEE HEITMAN	Case number	(if known)
■ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	STATE FARM- HUSBAND & WIFE EACH HAS A TERM LIFE INS POLICY IN WHICH THEY ARE EACH OTHER'S BENEFICIARY		
	CIGNA- TERM LIFE INS POLICY	HUSBAND, WIFE	\$0.00
If you somed ■ No	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance one has died. Give specific information	policy, or are currently entitl	ed to receive property because
Exam _i ■ No	s against third parties, whether or not you have filed a lawsuit or mad ples: Accidents, employment disputes, insurance claims, or rights to sue Describe each claim	le a demand for payment	
■ No	contingent and unliquidated claims of every nature, including counted Describe each claim	erclaims of the debtor and	rights to set off claims
■ No	nancial assets you did not already list Give specific information		
	the dollar value of all of your entries from Part 4, including any entrie art 4. Write that number here		ched \$1,541.00
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List an	y real estate in Part 1.	
_	own or have any legal or equitable interest in any business-related property? to Part 6.		
_	Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have you own or have an interest in farmland, list it in Part 1.	an Interest In.	
□ No.	u own or have any legal or equitable interest in any farm- or commerce Go to Part 7.	cial fishing-related proper	y?
■ Yes	s. Go to line 47.		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	animals oles: Livestock, poultry, farm-raised fish		
	5 RHODE ISLAND RED HENS-50 8 GOLDEN C	OMET HENS-80	\$130.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1 Debtor 2	DAVID MICHAEL HEITMAN MISTY RENEE HEITMAN		Case number (if known)	
_	either growing or harvested			
■ No				
⊔ Yes.	Give specific information			
49. Farm a □ No	and fishing equipment, implements, machinery, fixtures,	and tools of trade		
Yes.				
	2 CHICKEN COOPS			\$200.00
50. Farm a □ No	and fishing supplies, chemicals, and feed			
■ Yes.				
	FEED & SUPPLIES			\$40.00
52. Add for P Part 7: 53. Do you	the dollar value of all of your entries from Part 6, includir art 6. Write that number here	u Did Not List Above		\$370.00
	Give specific information			
54. Add	the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$39,300.00
56. Part	2: Total vehicles, line 5	\$4,050.00	_	
57. Part	3: Total personal and household items, line 15	\$3,757.00		
58. Part	4: Total financial assets, line 36	\$1,541.00		
	5: Total business-related property, line 45	\$0.00		
	6: Total farm- and fishing-related property, line 52	\$370.00		
61. Part	7: Total other property not listed, line 54 +	\$0.00		
62. Total	personal property. Add lines 56 through 61	\$9,718.00	Copy personal property total	\$9,718.00
63. Total	I of all property on Schedule A/B. Add line 55 + line 62			\$49,018.00

Official Form 106A/B Schedule A/B: Property page 7

Fill in this information to identify your case:							
Debtor 1 DAVID MICHAEL HEITMAN							
	First Name	Middle Name	Last Name				
Debtor 2	MISTY RENEE HE	ITMAN					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF	TENNESSEE				
Case number(if known)					☐ Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 to	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	4' x 7' UTILITY TRAILER	\$150.00		\$150.00	Tenn. Code Ann. § 26-2-103
	Line from Schedule A/B: 4.1			100% of fair market value, up to any applicable statutory limit	
	TABLE & CHAIRS-100	\$1,767.00		\$1,767.00	Tenn. Code Ann. § 26-2-103
	REFRIGERATOR-50 FREEZER-50 MICROWAVE-25 HUTCH-75 CHINA-15 MICROWAVE CART-10 SOFA-50 LOVVESEAT-30 CHAIR-40 TABLE-50 LAMP-2 3 TVs-170 DVD PLAYER-10 2 COMPUTERS-150 PRINTER-20 BEDROOM 1-150 BEDROOM 2-100 BEDROOM 3-100 BED Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	5 FITNESS TRACKERS-75 3 KINDLE FIRE TABLETS-45 BATTERY	\$160.00		\$160.00	Tenn. Code Ann. § 26-2-103
	CHARGER-40 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	SPORTS EQUIPMENT/GEAR-200 CAMPING GEAR-150	\$510.00		\$510.00	Tenn. Code Ann. § 26-2-103
	SCRAPBOOKING SUPPLIES-120 Line from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

WISTI KENEE HEITWAN				
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
MUZZLE LOADER Line from Schedule A/B: 10.1	\$80.00	•	\$80.00	Tenn. Code Ann. § 26-2-103
			100% of fair market value, up to any applicable statutory limit	
CLOTHES Line from Schedule A/B: 11.1	\$400.00	•	\$400.00	Tenn. Code Ann. § 26-2-104
			100% of fair market value, up to any applicable statutory limit	
WEDDING RINGS-300 EARRINGS-30 NECKLACES-40	\$420.00		\$420.00	Tenn. Code Ann. § 26-2-103
RINGS-50 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
CAT- PET FISH TANK	\$0.00		\$0.00	Tenn. Code Ann. § 26-2-103
Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
300 BOOKS-150 10 PICTURES-120 X-BOX 360 W/7 GAMES-100 CDs &	\$420.00		\$420.00	Tenn. Code Ann. § 26-2-103
DVDs-50 Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	
FSNB- CHECKIN Line from Schedule A/B: 17.1	\$386.00		\$386.00	Tenn. Code Ann. § 26-2-103
			100% of fair market value, up to any applicable statutory limit	
PUTNAM PROPERTIES Line from Schedule A/B: 22.1	\$1,155.00		\$1,155.00	Tenn. Code Ann. § 26-2-103
			100% of fair market value, up to any applicable statutory limit	
STATE FARM- HUSBAND & WIFE EACH HAS A TERM LIFE INS POLICY	\$0.00		\$0.00	Tenn. Code Ann. § 56-7-203
IN WHICH THEY ARE EACH OTHER'S BENEFICIARY			100% of fair market value, up to any applicable statutory limit	
CIGNA- TERM LIFE INS POLICY Beneficiary: HUSBAND, WIFE Line from Schedule A/B: 31.1				
5 RHODE ISLAND RED HENS-50 8 GOLDEN COMET HENS-80	\$130.00		\$130.00	Tenn. Code Ann. § 26-2-103
Line from Schedule A/B: 47.1			100% of fair market value, up to any applicable statutory limit	
2 CHICKEN COOPS Line from Schedule A/B: 49.1	\$200.00		\$200.00	Tenn. Code Ann. § 26-2-103
			100% of fair market value, up to any applicable statutory limit	
FEED & SUPPLIES Line from Schedule A/B: 50.1	\$40.00		\$40.00	Tenn. Code Ann. § 26-2-103
			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Doc 1

	tor 1 tor 2	DAVID MICHAEL HEITMAN MISTY RENEE HEITMAN	Case number (if known)
3.	(Subj	you claiming a homestead exemption of more than \$170,350? oject to adjustment on 4/01/22 and every 3 years after that for cases filed on or aft No	er the date of adjustment.)
	_	Yes. Did you acquire the property covered by the exemption within 1,215 days be ☐ No	efore you filed this case?
		П . Voo	

Fill in this information to identif	y your case:			
Debtor 1 DAVID MIC	HAEL HEITMAN			
First Name	Middle Name Last Name		-	
Debtor 2 MISTY REN	IEE HEITMAN			
(Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court for	or the: MIDDLE DISTRICT OF TENNESSEE		-	
Case number				
(if known)			☐ Check	if this is an
			amend	led filing
Official Form 100D				
Official Form 106D				
Schedule D: Credit	ors Who Have Claims Secured	l by Propert	У	12/15
Be as complete and accurate as nos	sible. If two married people are filing together, both are equ	ually responsible for s	unnlying correct informa	tion If more space
	fill it out, number the entries, and attach it to this form. Or			
1. Do any creditors have claims secu	red by your property?			
☐ No. Check this box and su	bmit this form to the court with your other schedules. Yo	ou have nothing else	to report on this form.	
Yes. Fill in all of the inform	·	· ·	•	
Part 1: List All Secured Clain		Column A	Column B	Column C
	or has more than one secured claim, list the creditor separately tor has a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
	habetical order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 AAG FINANCE	Describe the property that secures the claim:	value of collateral. \$6,063.00	claim \$3,200.00	If any
Creditor's Name	2006 TOYOTA SIENNA	ФО,003.00	Ψ3,200.00	\$2,863.00
Ordano Marine	2000 TOTOTA SIENNA			
111 ALPHA DR	As of the date you file, the claim is: Check all that			
FRANKLIN TN 37064	apply. ☐ Contingent			
Number, Street, City, State & Zip Coo				
,,,,,,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortgage or sec	ured		
☐ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and and	other U Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset) PMSI LIEN	ON VEHICLE		

community debt

Date debt was incurred 4/14/2017

Last 4 digits of account number

Debt	or 1 DAVID MICHAEL HEI	ΤΜΔΝ			Case number (if known)		
2001		e Name	Last Name	_	Cass manness (manness)		
Debt	or 2 MISTY RENEE HEITM	AN					
	First Name Midd	e Name	Last Name	_			
2.2	HEIGHTS EINANGE	Dogariba t	ha proparty that coouras	the eleims	\$419.00	¢4 767 00	\$0.00
2.2	HEIGHTS FINANCE Creditor's Name		he property that secures & CHAIRS-100	the Claim.	Ψ419.00	\$1,767.00	\$0.00
			ERATOR-50 FREE	7FR-50			
			VAVE-25 HUTCH-7				
			5 MICROWAVE CA				
		SOFA-50	LOVVESEAT-30				
		CHAIR-4	O TABLE-50 LAMI	P-2 3			
		TVs-170	DVD PLAYER-10	2			
			TERS-150 PRINTER				
		BEDRO0 BE	OM 1-150 BEDROO	M 2-100			
	530 W JACKSON ST #B COOKEVILLE TN 38501	apply.	late you file, the claim is:	: Check all that			
		Contingent					
	Number, Street, City, State & Zip Code	Dispute					
Who	owes the debt? Check one.		u lien. Check all that apply.				
_	ebtor 1 only		ement you made (such as	mortgage or s	secured		
_	ebtor 2 only	car loa		3.3.			
_	ebtor 1 and Debtor 2 only	☐ Statutor	ry lien (such as tax lien, me	chanic's lien)			
_	t least one of the debtors and another	_	ent lien from a lawsuit	zoriariio 3 ilori)			
_	heck if this claim relates to a	Ü	ncluding a right to offset)				
	ommunity debt		noidaing a right to ondoty				
Date	debt was incurred 1/11/2019	Las	t 4 digits of account num	nber			
	SPECIALIZED LOAN						
2.3	SERVICING	Describe t	he property that secures	the claim:	\$22,841.00	\$39,300.00	\$0.00
	Creditor's Name		AVE SOUTH BAXT	ER TN			
		A = = f 4l= = =	lata fila tha alaim ia				
	PO BOX 266005	apply.	late you file, the claim is:	Check all that			
	LITTLETON CO 80163	☐ Conting	ent				
	Number, Street, City, State & Zip Code	Unliquio	lated				
		☐ Dispute	d				
Who	owes the debt? Check one.	Nature of	lien. Check all that apply.				
	ebtor 1 only		ement you made (such as	mortgage or s	secured		
■ De	ebtor 2 only	car loa	n)				
□ De	ebtor 1 and Debtor 2 only	☐ Statutor	y lien (such as tax lien, me	echanic's lien)			
☐ At	least one of the debtors and anothe	er 🔲 Judgme	ent lien from a lawsuit				
	heck if this claim relates to a community debt	Other (i	ncluding a right to offset)	1ST MOR	TGAGE		

Date debt was incurred 6/5/2002

Last 4 digits of account number

Debtor 1 DAVID MICHAEL HEITMAN				AN		Case number (if known)		
		First Name	Middle N	ame Last Name		_		
Deb	tor 2	MISTY RE	NEE HEITMAI	N				
		First Name	Middle N	ame Last Name				
	1							
2.4		NNESSEE 1 ANS	IIILE	Describe the property that secur	es the claim:	\$3,200.00	\$700.00	\$2,500.00
		itor's Name		2005 DODGE CARAVAN				
		S S JEFFER OKEVILLE		As of the date you file, the claim apply. Contingent	is: Check all that			
	Num	ber, Street, City, S	State & Zip Code	☐ Unliquidated				
Who	owe	s the debt? (Check one.	☐ Disputed Nature of lien. Check all that app	ly.			
_		1 only 2 only		☐ An agreement you made (such car loan)	as mortgage or	secured		
	ebtor	1 and Debtor 2	? only	☐ Statutory lien (such as tax lien,	mechanic's lien)			
ПА	t leas	t one of the deb	otors and another	☐ Judgment lien from a lawsuit				
		if this claim re unity debt	elates to a	Other (including a right to offset	TITLE LO	DAN		
Date	debt	was incurred	10/2018	Last 4 digits of account n	umber			
Ad	d the	dollar value o	f your entries in C	olumn A on this page. Write that n	umber here:	\$32,523.00		
		the last page	•	the dollar value totals from all pag	es.	\$32,523.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this info	ormation to identify your o	case:	
Debtor 1	DAVID MICHAEL I	HEITMAN	
	First Name	Middle Name Last Name	
Debtor 2	MISTY RENEE HE		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States	Bankruptcy Court for the:	MIDDLE DISTRICT OF TENNESSEE	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	rm 106E/F		
		ho Have Unsecured Claims	12/15
		e Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONF	
Schedule D: Cre left. Attach the C name and case	ditors Who Have Claims Secu	red Leases (Official Form 106G). Do not include any creditors with partially so ured by Property. If more space is needed, copy the Part you need, fill it out, n e. If you have no information to report in a Part, do not file that Part. On the to	umber the entries in the boxes on the
	ditors have priority unsecured		
■ No. Go t		a cianna agamat you :	
_	0 Рап 2.		
Part 2: List	t All of Your NONPRIORIT	V. Unacquired Claims	
_ '	ditors have nonpriority unsec	• ,	
☐ No. You	have nothing to report in this pa	art. Submit this form to the court with your other schedules.	
Yes.			
unsecured of	claim, list the creditor separately	nims in the alphabetical order of the creditor who holds each claim. If a creditor of the creditor who holds each claim. If a creditor for each claim. For each claim listed, identify what type of claim it is. Do not list claim the other creditors in Part 3.If you have more than three nonpriority unsecured claim.	ms already included in Part 1. If more
			Total claim
4.1 ADV	ANCE FINANCIAL	Last 4 digits of account number	\$7,423.86
ATTN 100 C	ority Creditor's Name I: BANKRUPTCY DEPT DCEANSIDE DR HVILLE, TN 37204	When was the debt incurred?	
	er Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	ncurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
☐ Deb	otor 1 only	☐ Contingent	
☐ Deb	otor 2 only	☐ Unliquidated	
■ Deb	otor 1 and Debtor 2 only	☐ Disputed	
☐ At le	east one of the debtors and and		
	eck if this claim is for a comn		
debt	claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that report as priority claims	it you did not
■ No		lacksquare Debts to pension or profit-sharing plans, and other similar debts	i
☐ Yes	3	Other, Specify	

Debtor 1 DAVID MICHAEL HEITMAN Case number (if known) Debtor 2 MISTY RENEE HEITMAN 4.2 **BRIGHT STARCASH** Last 4 digits of account number \$720.82 Nonpriority Creditor's Name **PO BOX 502** When was the debt incurred? **LAC DU FLAMBEAU WI 54538** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 **CASHNET USA** Last 4 digits of account number \$4,479.20 Nonpriority Creditor's Name When was the debt incurred? 1600 W 7TH ST **FT WORTH TX 76102** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 **CELTIC BANK** Last 4 digits of account number \$895.00 Nonpriority Creditor's Name 4550 NEW LINDEN HILL RD #400 When was the debt incurred? **WILMINGTON DE 19808** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Debtor 1 DAVID MICHAEL HEITMAN Case number (if known) Debtor 2 MISTY RENEE HEITMAN 4.5 CHILDRENS ANESTHESIOLOGISTS Last 4 digits of account number \$900.00 Nonpriority Creditor's Name 21 CLINCH AVE When was the debt incurred? **KNOXVILLE TN 37916** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 **CHILDRENS WEST SURGERY CTR** Last 4 digits of account number \$142.00 Nonpriority Creditor's Name When was the debt incurred? **1020 CHILDRENS WAY KNOXVILLE TN 37922** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **CONTINENTAL FINANCE** Last 4 digits of account number \$728.00 Nonpriority Creditor's Name 4550 NEW LINDEN HILL RD #400 When was the debt incurred? **WILMINGTON DE 19808** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

	2 MISTY RENEE HEITMAN	Case number (if known)	
4.8	CONTINENTAL FINANCE Nonpriority Creditor's Name	Last 4 digits of account number	\$493.00
	4550 NEW LINDEN HILL RD #400 WILMINGTON DE 19808	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	COOKEVILLE REG MED CTR	Last 4 digits of account number	\$107.00
	Nonpriority Creditor's Name C/O PREMIERE CREDIT PO BOX 199014	When was the debt incurred?	
	INDIANAPOLIS, IN 46219		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	COOKEVILLE REGIONAL PRIMARY	Last 4 digits of account number	\$4,765.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ-1,1 00.00
	C/O FOX COLLECTION CENTER PO BOX 528	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Offeck all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	

Other. Specify

1 DAVID MICHAEL HEITMAN 2 MISTY RENEE HEITMAN	Case number (if known)	
CREDIT ONE	Last 4 digits of account number	\$1,125.
Nonpriority Creditor's Name ATTN: BANKRUPTCY DEPT	When was the debt incurred?	
PO BOX 98872 LAS VEGAS, NV 89193	_	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	DObligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
EAST TENNESSEE MEDICAL GRP	Last 4 digits of account number	\$1,915.
Nonpriority Creditor's Name 266 E JOULE ST	When was the debt incurred?	
ALCOA TN 37701	A of the date was file the alains in Obsal all that and	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	П	
Debtor 2 only	☐ Contingent	
_	Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
EVERGREEN SERVICES	Last 4 digits of account number	\$273.
Nonpriority Creditor's Name PO BOX 834	When was the debt incurred?	·
LAC DU FLAMBEAU WI 54538 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	

	or 1 DAVID MICHAEL HEITMAN or 2 MISTY RENEE HEITMAN	Case number (if known)	
4.1 4	FINGERHUT	Last 4 digits of account number	\$2,786.00
	Nonpriority Creditor's Name 6250 RIDGEWOOD RD ST CLOUD MN 56303	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.1 5	FIRST PREMIER BANK	Last 4 digits of account number	\$1,206.00
-	Nonpriority Creditor's Name 3820 N LOUISE AVE	When was the debt incurred?	
	SIOUX FALLS SD 57107	- As of the late of the development of	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 6	FIRST PREMIER BANK	Last 4 digits of account number	\$1,047.00
	Nonpriority Creditor's Name 3820 N LOUISE AVE	When was the debt incurred?	
	SIOUX FALLS SD 57107 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify

r 1 DAVID MICHAEL HEITMAN r 2 MISTY RENEE HEITMAN	Case number (if known)	
GREEN TRUST	Last 4 digits of account number	\$407.32
Nonpriority Creditor's Name PO BOX 340 HAYS MT 59527	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
HESSE CREEK ER PHYS	Last 4 digits of account number	\$89.00
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ03.00
C/O COLL BUR OF FWB PO BOX 4127	When was the debt incurred?	
FT WALTON BEACH, FL 32549 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
INBOX LOAN	Last 4 digits of account number	\$1,591.09
Nonpriority Creditor's Name	Last 4 digits of account number	\$1,001.00
PO BOX 881 SANTA ROSA CA 5402	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	

■ No

☐ Yes

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debtor Debtor	1 DAVID MICHAEL HEITMAN 2 MISTY RENEE HEITMAN	Case number (if known)	
4.2	INDIGO	Last 4 digits of account number	\$695.00
<u> </u>	Nonpriority Creditor's Name C/O GENESIS FS CARD SERVICES PO BOX 4477 BEAVERTON, OR 97076	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.2	LINE OF CREDIT NOW	Last 4 digits of account number	\$656.88
	Nonpriority Creditor's Name PO BOX 959 WOOD DALE IL 60191	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	MAJESTIC LAKE FINANCIAL	Last 4 digits of account number	\$1,567.50
	Nonpriority Creditor's Name 635 E HWY 20 K UPPER LAKE CA 95485	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

	1 DAVID MICHAEL HEITMAN 2 MISTY RENEE HEITMAN	Case number (if known)	
4.2	MASSEYS	Last 4 digits of account number	\$456.32
	Nonpriority Creditor's Name C/O CONVERGENT OUTSOURCING PO BOX 9004 RENTON, WA 98057	When was the debt incurred?	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify	
4.2	MERRICK BANK	Last 4 digits of account number	\$868.00
	Nonpriority Creditor's Name		
	BANKRUPTCY DEPT	When was the debt incurred?	
	PO BOX 9201 OLD BETHPAGE, NY 11804		
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	MONEYKEY	Last 4 digits of account number	\$1,172.45
	Nonpriority Creditor's Name 3422 OLD CAPITOL TR #1613	When was the debt incurred?	
	WILMINGTON DE 19808		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify

MISTY RENEE HEITMAN	Case number (if known)	
MONEYLION	Last 4 digits of account number	\$30
Nonpriority Creditor's Name 30 WEST 31ST ST 9TH FL NEW YORK NY 10010	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
NET CASH MAN	Last 4 digits of account number	\$8
Nonpriority Creditor's Name 2240-D GALLOWS RD VIENA VA 22182	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
PAYPAL	Last 4 digits of account number	\$4,2
Nonpriority Creditor's Name		
ATTN: BANKRUPTCY DEPT	When was the debt incurred?	
PO BOX 5138 TIMONIUM, MD 21094		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	• • • • • • • • • • • • • • • • • • • •	
☐ Debtor 1 only	☐ Contingent	
	cogork	

debt

■ No ☐ Yes ☐ Disputed

☐ Student loans

Other. Specify

Type of NONPRIORITY unsecured claim:

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

 $\hfill\square$ Check if this claim is for a community

Debto Debto	or 1 DAVID MICHAEL HEITMAN or 2 MISTY RENEE HEITMAN	Case number (if known)	
4.2 9	PEDIATRIC UROLOGY	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name C/O WAKEFIELD & ASSOCIATES PO BOX 50250	When was the debt incurred?	
	KNOXVILLE, TN 37950 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3 0	PLAIN GREEN LOANS	Last 4 digits of account number	\$1,143.00
	Nonpriority Creditor's Name ATTN: BANKRUPTCY DEPT PO BOX 270	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
		report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	163	Other. Specify	
4.3	PREMIER DIAGNOSTIC IMAGING	Last 4 digits of account number	\$385.00
	Nonpriority Creditor's Name C/O FOX COLL CTR	When was the debt incurred?	
	PO BOX 528 GOODLETTSVILLE, TN 37070 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	To of the date you me, the damin of officer all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	

debt

■ No

☐ Yes

☐ Student loans

Other. Specify

 \square Check if this claim is for a community

Is the claim subject to offset?

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 \square Debts to pension or profit-sharing plans, and other similar debts

Debtor Debtor	1 DAVID MICHAEL HEITMAN 2 MISTY RENEE HEITMAN	Case number (if known)	
4.3	REGIONS BANK	Last 4 digits of account number	\$2,136.27
	Nonpriority Creditor's Name ATTN: BANKRUPTCY DEPT	When was the debt incurred?	
	PO BOX 11007 BIRMINGHAM, AL 35288-8800 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.3	RHODES & SLAGER FAMILY		\$595.00
3	Nonpriority Creditor's Name	Last 4 digits of account number	\$393.00
	1100 NEAL ST COOKEVILLE TN 38501	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	RUSHMORE LOAN MGMT SVCS	Last 4 digits of account number	\$945.50
	Nonpriority Creditor's Name PO BOX 55004 IRVINE CA 92619	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No.	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify

2 MISTY RENEE HEITMAN	Case number (if known)	
SATELLITE MED URGENT CARE	Last 4 digits of account number	\$140
Nonpriority Creditor's Name 1120 SAMS ST COOKEVILLE TN 38506	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
SATELLITE MED URGENT CARE	Last 4 digits of account number	\$101
Nonpriority Creditor's Name C/O WAKEFIELD & ASSOCIATES PO BOX 50250	When was the debt incurred?	·
KNOXVILLE, TN 37950 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
SERVICE LOAN	Last 4 digits of account number	\$800
Nonpriority Creditor's Name PO BOX 2935	When was the debt incurred?	
GAINESVILLE GA 30503 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	auto jou mo, the stant for enoun an trial apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	

debt

■ No

☐ Yes

Other. Specify

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

 $\hfill\square$ Check if this claim is for a community

Is the claim subject to offset?

	or 2 MISTY RENEE HEITMAN	Case number (if known)	
4.3 8	SPEEDY CA\$H	Last 4 digits of account number	\$1,327.00
	Nonpriority Creditor's Name C/O AD ASTRA REC SVC 7330 W 33RD ST #118 WICHITA, KS 67205	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No □ Yes	report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
		— Other. Specify	
4.3	SPOT LOAN Nonpriority Creditor's Name	Last 4 digits of account number	\$1,447.70
	PO BOX 927 PALATINE IL 60078 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
4.4	STONEBERRY	Last 4 digits of account number	\$993.89
	Nonpriority Creditor's Name PO BOX 2820 MONROE WI 53566	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

		CHAEL HEITMAN ENEE HEITMAN		Case nu	umber (if known)			
4.4 1 US	S BANKRI	JPTCY COURT	Last 4 digits of account number				\$881.00	
Nor 70	_	WAY ROOM 170	When was the debt incurred?					
		E TN 37203 City State Zip Code	As of the date you file, the claim	is: Check	call that apply			
		he debt? Check one.	7.6 of the date yearne, the claim	101 011001	t all that apply			
	Debtor 1 only	y	☐ Contingent					
	Debtor 2 only	y	☐ Unliquidated					
	Debtor 1 and	Debtor 2 only	☐ Disputed					
_		of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
_		s claim is for a community	☐ Student loans					
dek		s ciaini is for a community	☐ Obligations arising out of a sepa	aration ac	reement or divo	rce that you did not		
ls t	he claim sul	bject to offset?	report as priority claims		,	, , , , , , , , , , , , , , , , , , , ,		
	No		Debts to pension or profit-sharing	ng plans,	and other simila	r debts		
	Yes		Other. Specify					
4.4 2 ZC	CALOAN	l	Last 4 digits of account number				\$1,302.58	
	npriority Cred	litor's Name	-				<u>-</u>	
	01 CAPIT		When was the debt incurred?					
		ITO CA 98511 Dity State Zip Code	As of the date you file, the claim is: Check all that apply					
		he debt? Check one.	7.0 0. 0.0 0.00 ,00,		t all that apply			
	Debtor 1 only	y	☐ Contingent					
	Debtor 2 only	V	☐ Unliquidated					
_		d Debtor 2 only	☐ Disputed					
_		of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
			☐ Student loans					
∟ dek		s claim is for a community	☐ Obligations arising out of a sepa	aration an	reement or divo	rce that you did not		
ls t	he claim sul	bject to offset?	report as priority claims	aration ag	groomone or arro	roo that you did not		
	No		Debts to pension or profit-shari	ng plans,	and other similar	r debts		
	Yes		Other. Specify					
Part 3:	List Others	to Be Notified About a Debt	That You Already Listed					
5. Use this p	age only if y	ou have others to be notified abo	out your bankruptcy, for a debt that	you alrea	ıdy listed in Par	ts 1 or 2. For examp	le, if a collection agency	
is trying to have more	o collect from than one c	m you for a debt you owe to som	eone else, list the original creditor in ou listed in Parts 1 or 2, list the add	Parts 1	or 2, then list th	he collection agency	here. Similarly, if you	
Part 4:	Add the An	nounts for Each Type of Uns	ecured Claim					
	amounts of one		s. This information is for statistical I	eporting	purposes only	. 28 U.S.C. §159. Add	the amounts for each	
		-				otal Claim		
Tota		Domestic support obligations		6a.	\$	0.00	-	
claims from Part 1		Taxes and certain other debts y	ou owe the government	6b.	\$	0.00		
	6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$	0.00	-	
	6d.	Other. Add all other priority unsec	cured claims. Write that amount here.	6d.	\$	0.00	-	
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00		
	6f.	Student loans		6f.	To \$	otal Claim 0.00		
Tota					¥	0.00	-	

Official Form 106 E/F

claims

from Part 2

Schedule E/F: Creditors Who Have Unsecured Claims

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Page 15 of 16

0.00

Debtor 1 DAVID MICHAEL HEITMAN Debtor 2 MISTY RENEE HEITMAN

Case number (if known)

- Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- Total Nonpriority. Add lines 6f through 6i.

6h. \$	0.00
6i. \$ 5	4,289.84

54,289.84

Best Case Bankruptcy

Fill in this inform	mation to identify your	case:			
Debtor 1	DAVID MICHAEL	HEITMAN			
	First Name	Middle Name	Last Name		
Debtor 2	MISTY RENEE HE	ITMAN			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE		
Case number _					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3			<u> </u>	·	
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4			<u> </u>	2 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Doc 1

Fill in this	s information to identify your	case:		
Debtor 1	DAVID MICHAEL	HEITMAN		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fil	ing) MISTY RENEE H	EITMAN Middle Name	Last Name	
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	- TENNESSEE	
Case num	ber			
(if known)				Check if this is an
				amended filing
Officia	I Form 106H			
Sched	dule H: Your Cod	ebtors		12/15
people are fill it out, a	e filing together, both are equ	ally responsible for sup boxes on the left. Attac	pplying correct information that the high the hi	complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page, this page. On the top of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case	, do not list either spouse a	as a codebtor.
■ No □ Ye				
	ihin the last 8 years, have yo na, California, Idaho, Louisiana			? (Community property states and territories include ngton, and Wisconsin.)
.	0			
	. Go to line 3. s. Did your spouse, former spo	use or legal equivalent li	ve with you at the time?	
— 16	s. Dia your spouse, former spo	use, or legal equivalent in	ve with you at the time:	
in line Form	e 2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make s	if your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official GG). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D. line
0.1	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street			-
	City	State	ZIP Code	
3.2	Name			Schedule D, line
				☐ Schedule E/F, line ☐ Schedule G, line
	Nimber			- Contour O, line
	Number Street City	State	ZIP Code	

Schedule H: Your Codebtors

Fill in this information	to identify your case:	
Debtor 1	DAVID MICHAEL HEITMAN	
Debtor 2 (Spouse, if filing)	MISTY RENEE HEITMAN	
United States Bankru	ptcy Court for the: MIDDLE DISTRICT OF TENNESSEE	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Form	n 106l	MM / DD/ YYYY
Calcaduda le	Varia Incarno	, 22,

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **APPLICATION ANALYST CAREER COUNSELOR** Include part-time, seasonal, or CENTER FOR EXCELLENCE IN self-employed work. **MEDHOST SERVICES Employer's name HIGHER ED** Occupation may include student or homemaker, if it applies. **Employer's address DBA INDEPENDENCE UNIVERSITY** 6550 CARUTHERS PKWY #180 4021 SOUTH 700 EAST #400 **FRANKLIN TN 37067 SALT LAKE CITY UT 64107 APPROXIMATELY 1** How long employed there? 7+ YEARS **MONTH**

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 7,518.33 \$ 1,646.67

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 7,518.33 \$ 1,646.67

Debtor 1 DAVID MICHAEL HEITMAN
Debtor 2 MISTY RENEE HEITMAN

Case number (if known)

				Foi	Debtor 1		Debtor 2 or -filing spouse	
	Сору	line 4 here	4.	\$	7,518.33	\$	1,646.67	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	706.33	\$	125.97	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	433.33	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	1,136.83	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: COMBINED LIFE	5h.+	+ \$ _	25.87	- \$ _	0.00	
		SUPP LIFE	_	\$	53.76	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,356.12	\$	125.97	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	5,162.21	\$	1,520.70	
8.	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$_	0.00	
	8e.	Social Security	8e.	\$_	0.00	\$_	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$_	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h.+ _	+ \$_	0.00	- \$_	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_	0.00	
10.	Calcu	ulate monthly income. Add line 7 + line 9.	10. \$		5,162.21 + \$	1.5	520.70 = \$ 6	,682.91
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			· -			•
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a lify:	depen		•		Schedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines						,682.91
13.	Do y	ou expect an increase or decrease within the year after you file this form?	>				monthly i	
	_	No.						
		Yes. Explain:						

Fill in this	s information to identify your case:						
Debtor 1	DAVID MICHAEL HEITMA	N		Check if this is: An amended filing			
Debtor 2 (Spouse, if	filing) MISTY RENEE HEITMAN			A	supplement show	ving postpetition chapter the following date:	
United Star	tes Bankruptcy Court for the: MIDDLE DIS	TRICT OF TENNESS	SEE	N	MM / DD / YYYY		
Case numb (If known)	per						
Sche	al Form 106J dule J: Your Expense					12/1	
informati	mplete and accurate as possible. If tw ion. If more space is needed, attach ar (if known). Answer every question.						
Part 1:	Describe Your Household						
	nis a joint case?						
	vo. Go to line 2. Ves. Does Debtor 2 live in a separate he	ousehold?					
	No	ouserioid:					
	■ No Yes. Debtor 2 must file Official For	rm 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	r 2.		
2. Do y	you have dependents? No						
	YAS	out this information for a dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	not state the endents names.		CHILD		6	□ No ■ Yes	
			CHILD		7	□ No	
			CHILD		'	■ Yes □ No	
			CHILD		9	Yes	
			CHILD		12	□ No ■ Yes	
			CHILD		15	□ No ■ Yes	
expe	your expenses include enses of people other than rself and your dependents?						
	Estimate Your Ongoing Monthly Experience your expenses as of your bankruptcy is as of a date after the bankruptcy is file date.	filing date unless y					
the value	expenses paid for with non-cash gover e of such assistance and have included Form 106I.)				Your expe	enses	
4. The payr	rental or home ownership expenses for ments and any rent for the ground or lot.	or your residence. I	nclude first mortgage	e 4. \$		1,510.00	
If no	ot included in line 4:						
4a.	Real estate taxes			4a. \$		0.00	
4b.	Property, homeowner's, or renter's insu			4b. \$		0.00	
4c. 4d.	Home maintenance, repair, and upkee Homeowner's association or condomin			4c. \$ 4d. \$		100.00	
	litional mortgage payments for your re		me equity loans	4u. э 5. \$		0.00	

Official Form 106J

Debtor 1 DAVID MICHAEL HEITMAN Debtor 2 MISTY RENEE HEITMAN

Case number (if known)

btor 2 MISTY RENEE HEITMAN	Case number (if known)	
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	300.00
6b. Water, sewer, garbage collection	6b. \$	50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	280.00
6d. Other. Specify: STORAGE UNIT	6d. \$	104.00
Food and housekeeping supplies	7. \$	1,500.00
Childcare and children's education costs	8. \$	200.00
Clothing, laundry, and dry cleaning	9. \$	410.00
Personal care products and services	10. \$	175.00
. Medical and dental expenses	11. \$	400.00
Transportation. Include gas, maintenance, bus or train fare.	12. \$	500.00
Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	75.00
. Charitable contributions and religious donations	14. \$	
Insurance.	14. φ	300.00
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	170.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or		3.00
Specify:	16. \$	0.00
Installment or lease payments:	_	
17a. Car payments for Vehicle 1	17a. \$	338.00
17b. Car payments for Vehicle 2	17b. \$	175.00
17c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not re		0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form Other payments you make to support others who do not live with you.	n 1061).	0.00
Specify:	19.	0.00
Other real property expenses not included in lines 4 or 5 of this form or		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
. Other: Specify: ANIMAL EXPENSES	21. +\$	100.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	6,687.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form		-,5
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	6,687.00
, , ,		0,007.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	6,682.91
23b. Copy your monthly expenses from line 22c above.	23b\$	6,687.00
23c. Subtract your monthly expenses from your monthly income.		
The result is your monthly net income.	23c. \$	-4.09
. Do you expect an increase or decrease in your expenses within the year	after you file this form?	
For example, do you expect to finish paying for your car loan within the year or do you ex		ease or decrease because
modification to the terms of your mortgage?		
■ No.		
☐ Yes. Explain here:		

Fill in this inforr	nation to identify your	case:					
Debtor 1	DAVID MICHAEL						
Debtor 1	First Name	Middle Name	Las	t Name			
Debtor 2	MISTY RENEE HE	=ITMAN					
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSE	E			
Case number							
(if known)							Check if this is an amended filing
Official Forn		an la dividue	l Dabi	۔ اب ہ	Cabadulaa		
Declarat	ion About a	an Individua	i Debt	ors	Schedules		12/15
ears, or both. 18	B U.S.C. §§ 152, 1341, 1		muptoy out	o ouii i	esult in fines up to \$250,0	50, CI IIIIP	insolition up to 20
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help	you fi	I out bankruptcy forms?		
■ No							
☐ Yes. N	lame of person						etition Preparer's Notice, nature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sun	nmary and s	chedu	es filed with this declarati	on and	
X /s/ DAV	/ID MICHAEL HEITM	AN	Х	/s/ M	ISTY RENEE HEITMAN		
	MICHAEL HEITMAN				Y RENEE HEITMAN		
	e of Debtor 1				ture of Debtor 2		
Date _	August 19, 2019			Date	August 19, 2019		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

E311 5	n this inform	action to identify you				
		nation to identify you				
Debt	or 1	DAVID MICHAEL First Name	_ HEITMAN Middle Name	Last Name		
Debt	or 2	MISTY RENEE H		Edot Name		
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF T	ENNESSEE		
Case (if kno	e number wn)					Check if this is an amended filing
Sta		of Financial	Affairs for Individ			4/19
infori	mation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write yo	
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. \	What is you	r current marital statu	ıs?			
	■ Married □ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
i		t all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	I.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
	388 4TH A BAXTER T	VE SOUTH N 38544	From-To: 10/2014 TO 08/2017	■ Same as Debtor	1	■ Same as Debtor 1 From-To:
	■ No ■ Yes. Ma	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne nedule H: Your Codebtors (Ol	vada, New Mexico, Puerto R	ity property state or territor ico, Texas, Washington and V	
I	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
I	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$51,564.00	■ Wages, commissions, bonuses, tips	\$2,284.00
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

Best Case Bankruptcy

				Debtor 1		Debtor 2			
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc d Check all that a		Gross income (before deductions and exclusions)	
	r last caler anuary 1 to	ndar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$78,009.0	Wages, conbonuses, tips	■ Wages, commissions, bonuses, tips \$7,0		
				☐ Operating a business		☐ Operating a	business		
		dar year be December		■ Wages, commissions, bonuses, tips	\$71,038.0	Wages, con bonuses, tips	nmissions,	\$2,716.00	
				☐ Operating a business		☐ Operating a	business		
5.	Include in and other winnings. List each	come regard public bene If you are fil	dless of wheth fit payments; ling a joint cas the gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separa	amples of other income an rest; dividends; money co you received together, list	re alimony; child supp llected from lawsuits; it only once under D	royalties; ar ebtor 1.		
				Debtor 1		Debtor 2			
		4 Ocasalia B		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
га	rt 3: Lis	t Certain Fa	ayınıenıs rou	Made Before You Filed for	Бапкгирісу				
6.	Are eithe ☐ No.	Neither D	ebtor 1 nor ['s debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	<mark>umer debts.</mark> Consumer d	ebts are defined in 11	U.S.C. § 10	01(8) as "incurred by an	
		During the	90 days before 90 days	ore you filed for bankruptcy, di	d you pay any creditor a t	total of \$6,825* or mo	re?		
		☐ Yes	paid that cr not include	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support o his bankruptcy case.	bligations, such as cl	hild support	and alimony. Also, do	
		* Subject	to adjustmen	t on 4/01/22 and every 3 year	s after that for cases filed	on or after the date of	of adjustmen	t.	
	Yes.			or both have primarily consure you filed for bankruptcy, di		total of \$600 or more	?		
		□ No.	Go to line 7	7.					
		■ Yes	include pay	each creditor to whom you pai ments for domestic support o r this bankruptcy case.					
	Creditor	's Name an	d Address	Dates of payme	ent Total amount	•	Was this	payment for	
AAG FINANCE 111 ALPHA DR FRANKLIN TN 37064		REGULAR MONTHLY PAYMENTS O \$338	\$1,014.00			Card Repayment ers or vendors			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	btor 1 btor 2	DAVID MICHAEL HEITMAN MISTY RENEE HEITMAN		Cas	se number (if known)		
7.	<i>Inside</i> of wh	in 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which yeg g securities; and a	ou are a genera any managing a	al partner; corporations gent, including one for
		No					
		Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insid	in 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		ments or transfer a	any property on a	account of a d	ebt that benefited an
		No					
		Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pa	rt 4:	Identify Legal Actions, Repossession	s, and Foreclosures				
	modif	Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.	cases, small claims actions	s, divorces, collectio	n suits, paternity a	actions, suppor	t or custody
		e title e number	Nature of the case	Court or agency		Status of th	e case
10.		n 1 year before you filed for bankrupto k all that apply and fill in the details below		rty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
	_	No. Go to line 11.					
		Yes. Fill in the information below.	Describe the Property		Date		Value of the
	Orec	and Nume and Address	Explain what happened		Date		property
11.	acco	n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fir	nancial institutio	n, set off any a	amounts from your
	Cred	litor Name and Address	Describe the action the	creditor took	Date take	action was	Amount
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a		rty in the possess	ion of an assigne	ee for the bene	efit of creditors, a
		No Yes					
Pa	rt 5:	List Certain Gifts and Contributions					
	Withi	n 2 years before you filed for bankrup	tcy, did you give any gifts	with a total value	of more than \$6	00 per person	?
		Yes. Fill in the details for each gift.					
		s with a total value of more than \$600 person	Describe the gifts		Date the g	s you gave gifts	Value
		on to Whom You Gave the Gift and ress:					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 2 MISTY RENEE HEITMAN	Case number	(if known)	
	□ No	ptcy, did you give any gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co	ontribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	ŕ	Dates you contributed	Value
	RIVER COMMUNITY CHURCH	AVERAGE OF 300 PER MONTH	VARIOUS	\$0.00
	CAMPUS OUTREACH	BI-ANNUALLY	VARIOUS	\$200.00
	ROTARY CLUB		VARIOUS	\$400.00
Part	t 6: List Certain Losses			
	Within 1 year before you filed for bankrup or gambling?	otcy or since you filed for bankruptcy, did you lose an	ything because of the	ft, fire, other disaster
	No			
	☐ Yes. Fill in the details.			
	how the loce occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
		insurance claims on line 33 of Schedule A/B: Property.		
Part	t 7: List Certain Payments or Transfers			
	consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pr	otcy, did you or anyone else acting on your behalf pay reparing a bankruptcy petition? eparers, or credit counseling agencies for services requir		rty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	LEFKOVITZ & LEFKOVITZ 618 CHURCH ST., #410 NASHVILLE, TN 37219 slefkovitz@lefkovitz.com	Attorney Fees	Aug 7, 2019	\$900.00
		otcy, did you or anyone else acting on your behalf pay itors or to make payments to your creditors? you listed on line 16.	or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
			maac	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already No	siness or financial affa le as security (such as the	irs? he granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and va property transferr		paymer	ne any property or nts received or debts exchange	Date transfer was made
	Person's relationship to you			•	3	
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-proteins)		y property to a se	elf-settled	trust or similar device of	of which you are a
	■ No □ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prope	rty transf	erred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Insti	ruments, Safe Deposit	Boxes, and Stora	age Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred?	•				
	Include checking, savings, money market, or houses, pension funds, cooperatives, associated No			f deposit;	shares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
		loct 4 digits of	Type of account	t or	Data account was	Last balance
		Last 4 digits of account number	Type of account instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for	bankruptcy, any	safe depo	osit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accomplete Address (Number, State and ZIP Code)		escribe th	he contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 ye	ear before	you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
		Who else has or h	and access D	ocariba tl	he contents	Do you still
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)		escribe ti	ne contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	•				
23.	Do you hold or control any property that som for someone.	eone else owns? Inclu	ide any property	you borro	owed from, are storing fo	or, or hold in trust
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe th	he property	Value
Par	t 10: Give Details About Environmental Infor	mation				
For	the purpose of Part 10, the following definition	ns apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

Best Case Bankruptcy

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο

Official Form 107

Name

Address

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Date Issued

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

Debtor 1 DAVID MICHAEL HEITMAN			0	
Debtor 2 MISTY RENEE HEITMAN			Case number (if known)	
Part 12: Sign Below				
have read the answers on this Statement are true and correct. I understand that mal with a bankruptcy case can result in fines 18 U.S.C. §§ 152, 1341, 1519, and 3571.	king a false statement,	concealing property, o	or obtaining money or	
/s/ DAVID MICHAEL HEITMAN	/s/ MIS	STY RENEE HEITMA	N	
DAVID MICHAEL HEITMAN	MISTY	RENEE HEITMAN		
Signature of Debtor 1	Signat	ure of Debtor 2		
Date August 19, 2019	Date	August 19, 2019		
Did you attach additional pages to <i>Your Si</i> ■ No □ Yes	tatement of Financial A	Affairs for Individuals F	iling for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who	is not an attorney to h	nelp you fill out bankru	ptcy forms?	

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

				_
Fill in this infor	mation to identify your o	ase:		
Debtor 1	DAVID MICHAEL I	HEITMAN]
	First Name	Middle Name	Last Name	
Debtor 2	MISTY RENEE HE		Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRI	CT OF TENNESSEE	
Case number (if known)				☐ Check if this is an
Official Fo	orm 108			amended filing
Stateme	nt of Intention	n for Indiv	viduals Filing Under Chapt	er 7
You must file the whicher on the lift two married program and the worker write y	ever is earlier, unless the form eople are filing together nd date the form.	thin 30 days after e court extends the in a joint case, be e. If more space in ther (if known).	not expired. If you file your bankruptcy petition or by the date so the time for cause. You must also send copies to the time for cause. You must also send copies to the oth are equally responsible for supplying correct is needed, attach a separate sheet to this form. Or	he creditors and lessors you list information. Both debtors must
1. For any credit information b		rt 1 of Schedule I	D: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	reditor and the property th	at is collateral	What do you intend to do with the property that secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's A	AAG FINANCE		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt	f 2006 TOYOTA SIEN	INA	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's F	HEIGHTS FINANCE		☐ Surrender the property. ☐ Retain the property and redeem it.	□No
Description of			☐ Retain the property and enter into a	■ Yes

Statement of Intention for Individuals Filing Under Chapter 7

avoid lien using 11 U.S.C. § 522(f)

page 1

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2-100 BE

COMPUTERS-150 PRINTER-20 BEDROOM 1-150 BEDROOM

Best Case Bankruptcy

Debtor 1 Debtor 2 DAVID MICHAEL HEITMAN MISTY RENEE HEITMAN	Case number (if ,	known)
Creditor's SPECIALIZED LOAN SERVICING name:	■ Surrender the property. □ Retain the property and redeem it.	■ No
Description of property securing debt: 308 4TH AVE SOUTH BAXTER TN 38544 PUTNAM County	☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	□ Yes
Creditor's TENNESSEE TITLE LOANS name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of 2005 DODGE CARAVAN property securing debt:	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you liste In the information below. Do not list real estate leases. U Tou may assume an unexpired personal property lease i	d in Schedule G: Executory Contracts and Une nexpired leases are leases that are still in effe	ct; the lease period has not yet ended.
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

Deb	tor 2 MISTY RENEE HEITMAN	Case number (if known)
	a. a.	
Part	3: Sign Below	
llnda	or nonalty of noriury I doclare that I have indicate	d my intention about any property of my estate that secures a debt and any personal
	erty that is subject to an unexpired lease.	u my intention about any property of my estate that secures a debt and any personal
p. 0 p	or sy arran to cally our arrangement reaction	
Χ	/s/ DAVID MICHAEL HEITMAN	X /s/ MISTY RENEE HEITMAN
	DAVID MICHAEL HEITMAN	MISTY RENEE HEITMAN
	Signature of Debtor 1	Signature of Debtor 2
	Signature of Debtor 1	Signature of Debtor 2

Statement of Intention for Individuals Filing Under Chapter 7

page 3

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Debtor 1 DAVID MICHAEL HEITMAN

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Best Case Bankruptcy

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy CourtMiddle District of Tennessee

In 1	DAVID MICHAEL HEITMAN ** MISTY RENEE HEITMAN		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR D	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptc	y, or agreed to be pa	d to me, for services	
	For legal services, I have agreed to accept		\$	900.00	
	Prior to the filing of this statement I have received			900.00	
	Balance Due			0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person	n unless they are me	mbers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspe	cts of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, stated c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Exemption planning; preparation and filing household goods 	ment of affairs and plan which rs and confirmation hearing,	ch may be required; and any adjourned h	earings thereof;	
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc judicial lien avoidances, preparation and from stay actions, motions to redeem pro collateral, filing motions to aprove profes retention of special counsel, representati bankruptcy, or any other adversary proces	chargeability actions, att filing of reaffirmation ag operty, representation in ssionals, motions to app ion in any other Court or	endance at 2004 preements and ap any loan modific rove sale of prop	plications as need ation process, sub erty, motions to a	led, relief ostitution of uthorize
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for	or payment to me for	representation of the	e debtor(s) in
	August 19, 2019	/s/ Steven L. Let	kovitz		
_	Date	Steven L. Lefko	vitz 5953		
		Signature of Attorn LEFKOVITZ & L			
		618 CHURCH S			
		NASHVILLE, TN	37219		
		615-256-8300 F slefkovitz@lefko	ax: 615-255-4516		
		Name of law firm	JVILZ.GUIII		
		Traine of tan film			

United States Bankruptcy CourtMiddle District of Tennessee

DAVID MICHAEL HEITMAN		C N-	
n re MISTY RENEE HEITMAN	7.	Case No.	
	Debtor(s)	Chapter	7
VERI	FICATION OF CREDITOR	R MATRIX	
e above-named Debtors hereby verify th	nat the attached list of creditors is true and	correct to the best	of their knowledge.
ate: August 19, 2019	/s/ DAVID MICHAEL HEITMA	ΔN	
	Signature of Debtor		
ate: August 19, 2019	/s/ MISTY RENEE HEITMAN		
	MISTY RENEE HEITMAN		·

Signature of Debtor

DAVID MICHAEL HEITMAN CONTINENTAL FINANCE HESSE CREEK ER PHYS 356 E BANGHAM RD 4550 NEW LINDEN HILL RD #400 C/O COLL BUR OF FWB WILMINGTON DE 19808 COOKEVILLE TN 38501 PO BOX 4127 FT WALTON BEACH FL 32549 COOKEVILLE REG MED CTR MISTY RENEE HEITMAN INBOX LOAN C/O PREMIERE CREDIT 356 E BANGHAM RD PO BOX 881 COOKEVILLE TN 38501 PO BOX 199014 SANTA ROSA CA 5402 INDIANAPOLIS IN 46219 COOKEVILLE REGIONAL PRIMARY STEVEN L. LEFKOVITZ INDIGO C/O FOX COLLECTION CENTER LEFKOVITZ & LEFKOVITZ C/O GENESIS FS CARD SERVICE 618 CHURCH ST., #410 PO BOX 528 PO BOX 4477 NASHVILLE, TN 37219 GOODLETTSVILLE TN 37070 **BEAVERTON OR 97076** AAG FINANCE CREDIT ONE LINE OF CREDIT NOW 111 ALPHA DR ATTN: BANKRUPTCY DEPT PO BOX 959 FRANKLIN TN 37064 WOOD DALE IL 60191 PO BOX 98872 LAS VEGAS NV 89193 ADVANCE FINANCIAL EAST TENNESSEE MEDICAL GRP MAJESTIC LAKE FINANCIAL ATTN: BANKRUPTCY DEPT 266 E JOULE ST 635 E HWY 20 K 100 OCEANSIDE DR ALCOA TN 37701 UPPER LAKE CA 95485 NASHVILLE TN 37204 EVERGREEN SERVICES BRIGHT STARCASH PO BOX 502 MASSEYS PO BOX 834 C/O CONVERGENT OUTSOURCING LAC DU FLAMBEAU WI 54538 LAC DU FLAMBEAU WI 54538 PO BOX 9004 RENTON WA 98057 FINGERHUT CASHNET USA MERRICK BANK 1600 W 7TH ST 6250 RIDGEWOOD RD BANKRUPTCY DEPT FT WORTH TX 76102 ST CLOUD MN 56303 PO BOX 9201 OLD BETHPAGE NY 11804 CELTIC BANK FIRST PREMIER BANK MONEYKEY 4550 NEW LINDEN HILL RD #400 3820 N LOUISE AVE 3422 OLD CAPITOL TR #1613 WILMINGTON DE 19808 SIOUX FALLS SD 57107 WILMINGTON DE 19808

MONEYLION

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NET CASH MAN

VIENA VA 22182

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GREEN TRUST

PO BOX 340

HAYS MT 59527

HEIGHTS FINANCE

530 W JACKSON ST #B

COOKEVILLE TN 38501

CHILDRENS ANESTHESIOLOGISTS

CHILDRENS WEST SURGERY CTR

1020 CHILDRENS WAY

21 CLINCH AVE

KNOXVILLE TN 37916

KNOXVILLE TN 37922

PAYPAL ATTN: BANKRUPTCY DEPT PO BOX 5138 TIMONIUM MD 21094

SPECIALIZED LOAN SERVICING PO BOX 266005 LITTLETON CO 80163

PEDIATRIC UROLOGY C/O WAKEFIELD & ASSOCIATES PO BOX 50250 KNOXVILLE TN 37950

SPEEDY CA\$H C/O AD ASTRA REC SVC 7330 W 33RD ST #118 WICHITA KS 67205

PLAIN GREEN LOANS ATTN: BANKRUPTCY DEPT PO BOX 270 BOX ELDER MT 59521

SPOT LOAN PO BOX 927 PALATINE IL 60078

PREMIER DIAGNOSTIC IMAGING C/O FOX COLL CTR PO BOX 528 GOODLETTSVILLE TN 37070

STONEBERRY PO BOX 2820 MONROE WI 53566

REGIONS BANK ATTN: BANKRUPTCY DEPT PO BOX 11007 **BIRMINGHAM AL 35288-8800**

TENNESSEE TITLE LOANS 723 S JEFFERSON AVE COOKEVILLE TN 38501

RHODES & SLAGER FAMILY DENTAL US BANKRUPTCY COURT 1100 NEAL ST COOKEVILLE TN 38501

701 BROADWAY ROOM 170 NASHVILLE TN 37203

RUSHMORE LOAN MGMT SVCS PO BOX 55004 IRVINE CA 92619

ZOCALOAN 1801 CAPITAL AVE SACREMENTO CA 98511

SATELLITE MED URGENT CARE 1120 SAMS ST COOKEVILLE TN 38506

SATELLITE MED URGENT CARE C/O WAKEFIELD & ASSOCIATES PO BOX 50250 **KNOXVILLE TN 37950**

SERVICE LOAN PO BOX 2935 GAINESVILLE GA 30503